RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNITY, AND PARENTAL CONSENT AGREEMENT ("Agreement") for BIKE CLEVELAND

ACTIVITY & DATE:

PARTICIPANT'S NAME (PRINTED):

Rike Cleveland

(this form is to only be used for Individual Adults or for Adults on behalf of Minors)

IN CONSIDERATION of being permitted to participate in any way in **BIKE CLEVELAND** sponsored Bicycling Activities ("Activity") I, for myself, my personal representatives, assigns, heirs, and next of kin:

- 1. ACKNOWLEDGE, agree, and represent that I understand the nature of Bicycling Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further acknowledge that the Activity will be conducted over public roads and facilities open to the public during the Activity and upon which the hazards of traveling are to be expected. I further agree and warrant that if, at any time, I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.
- 2. FULLY UNDERSTAND that (a) BICYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH ("Risks"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the conditions in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I may incur as a result of my participation in the Activity.
- 3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE Bike Cleveland, the LAB, its respective administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS. And, I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

I AM 18 YEARS OF AGE OR OLDER, HAVE READ AND UNDERSTAND THE TERMS OF THIS AGREEMENT, UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS BY SIGNING THIS AGREEMENT, HAVE SIGNED IT VOLUNTARILY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW. I AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

PARTICIPANT'S SIGNATURE (only if age <u>18</u> or over):		I HAVE READ THIS RELEASE		
ADDRESS:	(Street)			
	(Street)	(City)	(State)	(Zip)
PHONE: (EMAIL: DATE:		
	DOES NOT have my permission to use my s, presentations, websites, and social media. I a		compensation shall become payable to r	
AND BELIEVE TH DISCHARGE, CO' DEMANDS, LOSS "RELEASEES" OR THE MINOR'S BE	OR'S PARENT AND/OR LEGAL GUARDIAN, UNITED BE QUALIFIED, IN GOOD HE WENANT NOT TO SUE, AND AGREE TO IN SES, OR DAMAGES ON THE MINOR'S ACONTHERWISE, INCLUDING NEGLIGENT RESENALF MAKES A CLAIM AGAINST ANY OF THE SATION EXPENSES, ATTORNEY FEES, LOSS LEGAL	EALTH, AND IN PROPER PHYSICAL CONI IDEMNIFY AND SAVE AND HOLD HARN COUNT CAUSED OR ALLEGED TO BE C CUE OPERATIONS AND FURTHER AGREE HE RELEASEES NAMED ABOVE, I WILL INI	DITION TO PARTICIPATE IN SUCH ACT MLESS EACH OF THE RELEASEES FRO CAUSED IN WHOLE OR IN PART BY THAT IF, DESPITE THIS RELEASE, I, TH DEMNIFY, SAVE, AND HOLD HARMLES	TIVITY. I HEREBY RELEASE, OM ALL LIABILITY, CLAIMS, THE NEGLIGENCE OF THE IE MINOR, OR ANYONE ON SS EACH OF THE RELEASEES
MINOR'S NAME	(PRINTED):		BIRTH DATE OF MIN	IOR:
SIGNATURE OF N	MINOR PARTICIPANT:	I HAVE READ THIS REL	EASE	
PARENT/GUARDI	IAN NAME (PRINTED):			
PARENT/GUARD	IAN SIGNATURE (only if participant is unde	er the age of 18):	HAVE READ THIS RELEASE	
ADDRESS:				
DUONE. /	(Street)	(City)	(State)	(Zip)

_DO NOT have my permission to use my or my child's photograph publically to promote Bike Cleveland. I understand that the images may be used in print publications, online publications,

presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.